

USPS TRACKING #



9590 9402 5308 9154 6562 64

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box*

Clerk, U.S. District Court, N.D. Ohio
Thomas D. Lambros Fed Bldg. & US Courthouse
125 Market Street
Youngstown, OH 44503



FILED

MAY 15 2020

CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF OHIO
YOUNGSTOWN

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Warden Mark Williams, FCI Elkhart
8730 Scroggs Road
Lisbon, OH 44432



9590 9402 5308 9154 6562 64

2. Article Number (Transfer from service label)

7020 0090 0001 5901 5326

4:20 LV 873

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *J. Molader*
☒ Agent
☒ Address

B. Received by (Printed Name)

J. Molader

C. Date of Delivery

5-13-20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input checked="" type="checkbox"/> Signature Confirmation |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Mail Restricted Delivery | |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt